

Name in Full

Certificate of Death

John Franklin Bailey  
 Town County  
 Died at Banks of the Annapolis MARYLAND  
 Date 1898 Aug 11 Age 75- Maryland Farmer  
 Male White Married Widower Number of children living 1  
 Husband of Mary Harrison  
 Father's Name Cornelia Bailey Mother's Name Elizabeth Wether  
 Cause of Death { Primary Lupus 22 d How long sick 12 years  
 Immediate Fatal poisoning by lupus  
 Reported by Thomas L. Higdon M.D.  
 Address Waverly Charles County Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 1898



Name in Full

Certificate of Death

Geo. J. Chappellman

Town

County

Died at

MARYLAND

Date 1898

Month

Day

Y.

M.

D.

Native of

Occupation

8

8

21

Age

59

Md

Merchant &amp; Farmer

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

7

Husband

of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Immediate

Death

How long sick

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 1898



Name in Full

Certificate of Death

Joseph Wallace Kent Conley

Died at <sup>Town</sup> Ditchley <sup>County</sup> Charles

MARYLAND

Date 189 <sup>8</sup> - <sup>8</sup> - <sup>20</sup> Age <sup>24</sup> - <sup>9</sup> - <sup>00</sup> <sup>Y.</sup> <sup>M.</sup> <sup>D.</sup> Native of Maryland Occupation <sup>over</sup> <sup>County</sup> <sup>Commissioner</sup>

Male White Married Widow Divorced

Female Colored Single Widower Number of children living

Husband  
of  
Wife

Father's Name Philip Ashton LeConte Mother's Name Elizabeth Leveys

Cause of Death { Primary Typhoid / How long sick Two weeks

Death { Immediate Heart Failure Accident, Suicide, Homicide

Reported by Thomas L. Higdon M.D.

Address Myrtle Charles County Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, FRODO



Name in Full

Town

County

MARYLAND

Died at

Date 189

Month

Day

Y.

M.

D.

Native of

Occupation

~~Main~~

White

Married

~~Widow~~~~Divorced~~

Female

~~Colored~~

Single

~~Widower~~Number of children living *Several*~~Husband~~  
of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.





Name in Full

Certificate of Death

Mary Smith King

Town

County

Died at

Near Pisgah Charles.

MARYLAND

Date 189

8

Month

8

Day

29

Y.

M.

D.

Age

49

6

12

Native of

Occupation

White

Married

~~Widow~~~~Divorced~~

Female

~~Colored~~~~Single~~~~Widow~~~~Number of children living~~~~Husband~~ of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Cholera Morbus 129

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

The Preston County Journal

Address

Sept. 15th.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



Name in Full

Certificate of Death

Arthur E Lee

Town

County

Died at

Put Tobacco

Charles

MARYLAND

Date 189

Month

Day

Y.

M.

D.

Native of

Occupation

8 18

Age

16-9-X

Maryland Farmer

Male

White

Married

Widow

Divorced

~~Female~~

Colored

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

Albert Lee

Mother's

Name

Lizzie Elsworth

Cause of

Primary

Typhoid Fever

How long sick

Death

Immediate

Tox. Pois.

~~Accident, Suicide, Homicide~~

Reported by

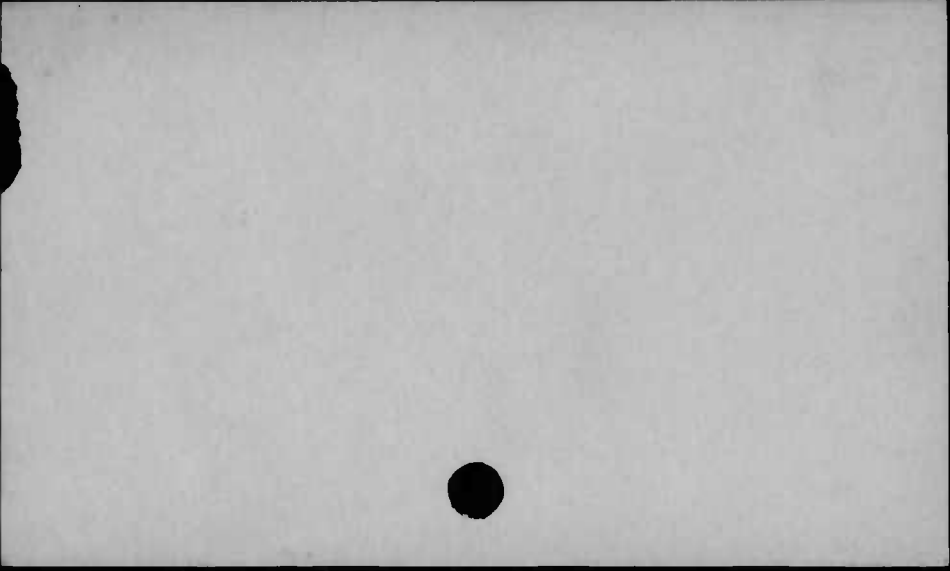
E. J. Spencer Dr.

Address

Bel Air Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, GEORGE



Name in Full

Certificate of Death

Otis M. Smoot

Town

County

Died at

La Plata

Charles.

MARYLAND

Date 189

Month

Day

Y.

M.

D.

Native of

Occupation

8 26 93

Age

93

Male

White

Married

~~Widow~~~~Divorced~~~~Female~~~~Colored~~~~Single~~~~Widower~~~~Number of children living~~

Husband

of

Alta Berry

Father's

Name

Mr David Smoot

Mother's

Name

474

Cause of

Primary

Consumption

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

The Times Present.

Address

La Plata

9-2.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Charles E. Stadel Undertaker.

Name in Full

Certificate of Death

Died at

Date 189

Male

~~Female~~

Husband

of

~~Wife~~

Father's

Name

Cause of

Death

Reported by

Address

Town

County

Month

Day

Y.

M.

D.

Native of

Occupation

Age

White

~~Widower~~

Widower

Number of children living 2

Mother's

Name

Primary

Immediate

How long sick

Accident, Suicide, Homicide

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65068

